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TREXLER, BUSHNELL, GIANGIORGI, BLACKSTONE & MARR, LTD.
COUNSELORS AT LAW

THE CLARK ADAMS BUILDING
105 WEST ADAMS STREET, SUITE 3600
CHICAGO, ILLINOIS 60603-6299
(312) 704-1890

RICHARD R. TREXLER (1906-1995)
RICHARD A. GIANGIORGI
RALFORD A. BLACKSTONE, JR.
DAVID J. MARR
LINDA L. PALOMAR
JAMES R. FOLEY
JAMES A. O'MALLEY
TIMOTHY M. MCCARTHY
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TO: Attn.: Examiner David P. Bryant FROM: Mr. James R. Foley, Reg. No. 39,979

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NOTES:

Inventor: Egbert Frenken
For: Riveting Device and Method for
Riveting
Serial No.: 10/069,838
Art Unit: 3726
Filed: May 20, 2002
Attorney Ref.: 913/40130/Case 300-PCT

CERTIFICATION OF FACSIMILE TRANSMISSION

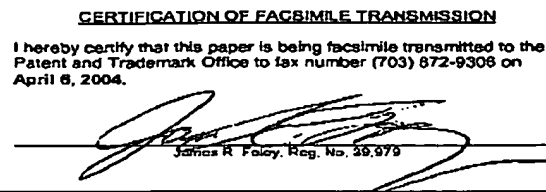
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FORM PTO-1083

Case Docket No. 913/40130/Case 300-PCTIn re application of: **Egbert Frenken**Serial No.: **10/069,838**Filed: **February 26, 2002**For: **RIVETING DEVICE AND METHOD
FOR RIVETING**MAIL STOP: RESPONSE
COMMISSIONER FOR PATENTS
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is a Response to the Office Action dated January 30, 2004.

The fee has been calculated as shown below:

| | (Col. 1) | | (Col. 2) | (Col. 3) |
|--|---|-------|---------------------------------------|------------------|
| | Claims Remaining After Amendment | | Highest No. Previously Paid for | Present Extra |
| TOTAL | * 11 | MINUS | ** 32 | 0 |
| INDEP. | * 2 | MINUS | *** 5 | 0 |
| <input type="checkbox"/> FIRST PRESENTATION OF MULTIPLE DEP. CLAIM | | | | |

| SMALL ENTITY | |
|--------------|--------------|
| Rate | Addl. Fee |
| x 9 = | \$.00 |
| x 43 = | \$.00 |
| x 135 = | \$.00 |
| TOTAL | |
| ADDIT. FEE | \$.00 |

OR

| OTHER THAN A SMALL ENTITY | |
|------------------------------|--------------|
| Rate | Addl. Fee |
| x 18 = | \$.00 |
| x 86 = | \$.00 |
| x 280 = | \$.00 |
| TOTAL | |
| | \$.00 |


OR

- * If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.
- ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.
- *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

The "Highest Number Previously Paid For" (Total or independent) is the highest number found from the equivalent box in Col. 1 of a prior amendment or the number of claims originally filed.

- ☐ Please charge my Deposit Account No. 20-1495 in the amount of \$ _____ to cover the fee for extra claims. A duplicate copy of this sheet is enclosed.
- ☐ A check in the amount of _____ to cover the filing fee is also enclosed.
- ☒ The Commissioner is hereby authorized to charge any insufficient payment associated with this communication or credit any overpayment to Deposit Account No. 20-1495. A duplicate copy of this sheet is enclosed.
- ☒ Any filing fees required under 37 CFR 1.16 for the presentation of extra claims.
- ☒ Any patent application processing fees under 37 CFR 1.17

Dated: April 6, 2004


 Richard A. Giangiorgetti Reg. No. 24,284
 James R. Foley Reg. No. 39,979
 Attorneys of Record

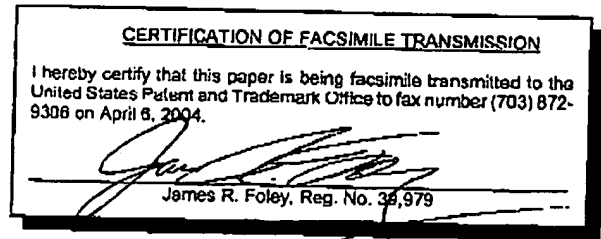
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Serial No.: 10/069,838)
Filed: May 20, 2002)
Title: RIVETING DEVICE AND)
METHOD FOR RIVETING)
Applicants: Egbert Frenken)
Art Unit: 3726)
Examiner: David P. Bryant)
Attorney Ref: 913/40130/Case 300-PCT)



RESPONSE TO THE OFFICE ACTION MAILED JANUARY 30, 2004

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450
Mail Stop: Response

Sir:

In the matter of the above-identified application and in response to the Office Action
mailed January 30, 2004, kindly enter the following amendments and consider the following
remarks toward reconsideration of the present application.